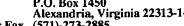
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885





INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

CURRENT CORRESPOND	ENCE ADDRESS (Note: Use El	ock 1 for any change of address)	Note Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
			papa	ers. Each additiona	al paper, such	as an assignme r transmission.	ent or termal draw	ing, must	
61834	7590 06/02	/2008	••••						
DREIER LLP	1		1 he	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
499 PARK AVI	3		, Stat	es Postal Service	with sufficient	postage for fir	st class mail in an	envelope	
NEW YORK, N			addı tran	ressed to the Mai smitted to the USP	I Stop ISSUI TO (571) 273	E FEE address 1-2885. on the d	above, or being late indicated belo	tacsimile w.	
new rolling.	1 10022							ntor's name)	
						\sim		(Signature)	
								(Date)	
	•		<u> </u>						
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY	DOCKET NO.	CONFIRMATIO	N NO.	
10/649,804	08/26/2003		Iven Connary		KD088	2(3KQ886)X	6001		
·	V: DETERMINING THR	EAT LEVEL ASSOCIA	TED WITH NETWORK A	CTIVITY	AUS920	065022US1			
				_				·····	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TO	TAL FEE(S) DUE	DATED	UE	
nonprovisional	NO	\$1440	\$300	\$0		\$1740	09/02/20	008	
EYAL	AINED	ART UNIT	CLASS-SUBCLASS	ו ^{87/3}	14/2008 AL	IONDAF2 0000	00086 090447	1064989	
L	EXAMINER		<u> </u>	j 61 E	FC:1501 1440.		_		
YALEW, FIKI	REMARIAM A	2136	713-201000		C-1504	1440.00 			
 Change of correspond CFR 1.363). 	ence address or indication	n of "Fee Address" (37	2. For printing on the p	• -		Seth H.			
	ondence address (or Cha	nee of Correspondence	(1) the names of up to or agents OR, alternation	 3 registered pater velv. 	nt attorneys				
	oondence address (or Cha B/122) attached.		(2) the name of a singl	e firm (having as	a member a	2 Dreier	LLP		
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3						
Number is required	·	icu. Ose or a Customer	listed, no name will be	printed.		3			
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)					
PLEASE NOTE: Un	less an assignee is ident	ified below, no assignee	data will appear on the p	atent. If an assign	nee is identifi	ed below, the d	locument has been	n filed for	
recordation as set for	th in 37 CFR 3.11. Comp	pletion of this form is NC	II a substitute for filing an	assignment.					
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
International	l Business Mach	ines Corporatio	n Armonk, NY				•		
			_						
Please check the approp	riate assignce category or	categories (will not be p	rinted on the patent):	Individual 🔼 C	orporation or	other private gr	oup entity UGC	overnment	
4a. The following fee(s)	are submitted:	4	b Payment of Fee(s): (Ples	se first reapply a	ny previousl	v paid issue fee	shown above)		
Issue Fee	are sacrifice.	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.							
	No small entity discount g	Payment by credit card. Form PTO-2038 is attached.							
Advance Order -		The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _09-0447 (enclose an extra copy of this form).							
		·	overpayment, to Depo	sit Account Numb	er <u>09-044</u>	(enclose a	in extra copy of th	is torm).	
	atus (from status indicate		D				ED 1 27(-)(2)		
	ns SMALL ENTITY state	_ %	b. Applicant is no lon						
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (in req records of the United Sta	uifed) will not be accepte ites Patent and Trademarl	ed from anyone other than t k Office.	he applicant; a reg	istered attorn	ey or agent; or ti	he assignee or our	er party in	
	111	1		_					
Authorized Signature	1/1/			Date 7	9/08			_	
-	7 7 7	chen	_			6			
Typed or printed nam	ne			Registration !	No			<u>-</u>	
This collection of inform	nation is required by 37 C	FR 1.311. The informati	on is required to obtain or 1.14. This collection is es	retain a benefit by	the public wh	ich is to file (an	d by the USPTO t	o process)	
an application. Confider submitting the complete	ntiality is governed by 35 and application form to the	U.S.C. 122 and 37 CFR USPTO. Time will var	1.14. This collection is est v depending upon the indiv	timated to take 12 /idual case. Anv o	minutes to co omments on t	implete, including the amount of ti	ng gathering, prep me you require to	aring, and complete	
this form and/or suggest	ions for reducing this bu	rden, should be sent to the	y depending upon the indivi- ne Chief Information Office COMPLETED FORMS TO	er, U.S. Patent and	Trademark C	Office, U.S. Dep	for Patents PO	erce, P.O.	
Alexandria, Virginia 22.	v irgima 22313-1430. DX 313-1450.	A MOI SEMD FEES UK	COMPLETED LOKAR I	כ זוויי אווייי	J. JEHAD 10	Commissioner		~~~ + T+V,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885



annionesie All Illinger	ed below or directed oth	o ine	Parent advance or	vers and nonlication	വ	ISINIENSNEE IEES W	ин ож п	tanen io me cunem	nould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
61834	7590 . 06/02	2008						_		
DREIER LLP					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope					
499 PARK AVE					addr	essed to the Mail	Stoo B	SSUE FEE address	above, or deing facsining	
NEW YORK, N	1	trans	smitted to the USP	ro (571)) 273-2885, on the da	ate indicated below.				
		┝		_		(Signature)				
		-				(Date)				
					<u></u>			 ,		
APPLICATION NO.	FILING DATE			FIRST NAMED INVEN	TOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/649,804	10/649,804 08/26/2003				Iven Connary			80000000000000000000000000000000000000		
TITLE OF INVENTION	: DETERMINING THR	EATL	EVEL ASSOCIAT	ED WITH NETWOR	K A	CTIVITY	AUS.	920003022031		
						.=-				
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1440	\$300		\$0		\$1740	09/02/2008	
EXAMINER ART UNIT			ART UNIT	CLASS-SUBCLASS						
YALEW, FIKREMARIAM A 2136			2136	. 713-201000						
1. Change of correspond CFR 1.363).	2. For printing on the patent front page, list (1) the parties of up to 3 registered potent attempts 1 Seth H. Ostrow									
				or agents OR, alternatively,						
"Fee Address" indication (or "Fee Address" Indication form				(2) the name of a single firm (naving as a member a registered attorney or agent) and the names of up to						
PTO/SB/47; Rev 03-0 Number is required.	2 registered patent listed, no name wil	attor be	meys or agents. If i printed.	no name	3					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	ТОВ	E PRINTED ON	THE PATENT (print o	r typ	e)				
PLEASE NOTE: Un recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Com	fied b	elow, no assignee of this form is NO	data will appear on the factor of the factor	he pa gan a	atent. If an assigne	ee is ide	entified below, the de	ocument has been filed for	
(A) NAME OF ASSI				(B) RESIDENCE: (C						
International	l Business Mach	ines	Corporation	a Armonk,	NY					
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government										
4a. The following fee(s)	are submitted:		41	. Payment of Fee(s): (Plea	se first reapply an	ıy previ	ously paid issue fee	shown above)	
Issue Fee				A check is enclos	ed.					
Publication Fee (N	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any									
Advance Order -	# of Copies			The Director is he overpayment, to I	reby Depos	authorized to char, sit Account Numbe	ge the re	equired fee(s), any de 0447 (enclose a	ficiency, or credit any nextra copy of this form).	
_ ~ .	tus (from status indicate		-	□ h Applicant is no	lone	er claiming SMAT	IENT	ITV etatus See 37 (T	FR 1 27(e)(2)	
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (i/required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.										
increst as snown by the	records of the Opined Sta	us Pat	ent and I rademark	Onice.	•					
Authorized Signature	/ / /	<u> </u>	<u> </u>	····		Date 7/	7/08			
Typed or printed nam	Frimothy . Be	chen				Registration N	io. <u>48</u>	,126		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.